June 19 CMS Quality Partner Workgroup

June 19, 2017
12:00 – 1:00 p.m. ET

Agenda

Topic	Speaker
• **Update on Payment Adjustment & Hardship Information** • **Advancing Care Information (ACI) Call for Measures**	**Kathleen Johnson** *Division of Health Information Technology, CMS*
Quality Data Model (QDM) v5.3 Release	**Shanna Hartman** *Division of Electronic and Clinician Quality, CMS* **Floyd Eisenber** *ESAC, Inc.*
Technical Instructions for QRDA Category I Submissions for eCQM Reporting to the Hospital IQR and the Medicare EHR Incentive Programs	**Shanna Hartman** *Division of Electronic and Clinician Quality, CMS* **Michael Holck** *ESAC, Inc.*
Post- Acute Care Announcements	**Amanda Barnes** *Division of Chronic and Post Acute Care (DCPAC), CMS*
Questions	

Payment Adjustment & Hardship Information

Kathleen Johnson

Division of Health Information Technology, CMS

2018 Hardship Form Deadlines

- The deadline for Eligible Professionals (EPs) and Eligible Hospitals to submit Hardship forms for the 2018 payment adjustment, based on the 2016 EHR reporting period is July 1, 2017.

- Please visit the [Payment Adjustments & Hardship Information](#) webpage on the EHR Incentive Programs website for more information on how EPs and Eligible Hospitals can submit Hardship forms.

ACI Call for Measures

Kathleen Johnson

Division of Health Information Technology, CMS

Reminder: Submit New Measures for ACI Performance Category for MIPS by June 30

- CMS encourages clinicians, organizations, and other stakeholders to identify and propose measures to be considered for the ACI Performance Category of MIPS in 2019.

- Measures in the ACI Performance Category are tools that help measure and assess the use of certified electronic health record technology.

- For more information, read the [Call for Measures and Activities fact sheet](#) to learn more and to understand the process for submitting measures for the MIPS performance categories.

How to Submit Proposed Measures

- Send proposed measures to CMSCallforMeasuresACI@ketchum.com using the Advancing Care Information Submission Form.

- Completed forms should include the following:
    - Measure description
    - Measure type (if applicable)
    - Reporting requirement (numerator and numerator description, Yes/No state, exclusions)
    - Certified EHR technology (CEHRT) functionalities (if applicable)
    - Scoring type (base, performance, bonus)

Quality Data Model (QDM) v5.3 Release

Shanna Hartman

Division of Electronic and Clinican Quality,CMS

Floyd Eisenberg

ESAC, Inc.

Objective

- The Centers for Medicare & Medicaid Services (CMS) has released the latest changes to the Quality Data Model (QDM) specification, version 5.3, for use with Clinical Quality Language (CQL).

- Support for these features and modifications will be implemented in the production version of the Measure Authoring Tool (MAT) scheduled for release in Fall 2017 (version 5.4).

Background

- QDM is an information model that defines relationships between patients and clinical concepts in a standardized format to enable electronic quality performance measurement.

- Previously published versions of the QDM (through version 4.3) included the data model and logic.

- Beginning in the QDM v5.0 Draft for use with CQL testing, the QDM includes only the data model and requires the use of the CQL standard as a separate method for expressing logic.

- CQL is a high-level human readable authoring language that allows measure authors to express data criteria and represent it in a way that is suitable for language processing.

QDM v5.3

- QDM v5.02 and v5.03 included minor changes for use with CQL testing.

- QDM v5.3 represents a significant change from prior production versions as it no longer contains any logic expression.

- Version 5.3 is the production version for CQL-based eCQMs.

QDM v5.3 High-level Changes

- Added clarification and guidance to existing QDM categories and attributes

- Removed
  - Encounter, Active
  - Radiation Dose
  - Radiation Duration
  - Reason attribute for Encounter, Performed

- Remodeled Location attribute for Encounter, Performed

- Created a new QDM datatype for Participation (and attribute Participation Period)

- Assigned cardinality to all QDM attributes

Resources

- QDM v5.0, v5.01, v5.02, and v5.3 are located on the eCQI Resource Center CQL Space
    - https://ecqi.healthit.gov/cql
- Past versions of QDM Specifications and QDM User Group meeting information can be found on the eCQI Resource Center QDM Space
    - https://ecqi.healthit.gov/qdm
- For questions or comments on the QDM, please contact the ESAC QDM team
    - qdm@esacinc.com
- To submit an issues ticket, please visit the ONC JIRA site
    - https://oncprojectracking.healthit.gov/support/projects/QDM/

Technical Instructions for QRDA Category I Submissions for eCQM Reporting to the Hospital IQR and the Medicare EHR Incentive Programs

Shanna Hartman

Division of Electronic and Clinican Quality,CMS

Michael Holck

ESAC, Inc.

Background

- CMS is issuing technical instructions for Quality Reporting Document Architecture (QRDA) Category I template submissions for eCQM reporting for the following programs:
    - Hospital Inpatient Quality Reporting (IQR)
    - Medicare Electronic Health Record (EHR) Incentive Program for Eligible Hospitals (EH) and Critical Access Hospitals (CAHs)

- This guidance is for eCQM submissions for calendar year (CY) 2017 and QRDA Category I files only

The Issue

- For implementers to have their eCQMs calculated correctly by the measure engine, they must submit the proper QRDA templates for the QDM data types.
- Currently, there is no validation check to ensure that the QRDA template is contained within an Act template structure. The measure engine therefore cannot identify the datatype in the measure calculation because it looks for the act template separately.
- This issue applies to the EH eCQMs that use the following QDM data types in their measure specifications for the CY 2017 reporting period:
  - Diagnosis
  - Device, Order
  - Encounter, Order
  - Encounter, Performed
  - Transfer From
  - Transfer To

Resolution and Guidance

- In the HL7 QRDA Category I Release 1, STU Release 3.1, a new QRDA template that uses the Act class structure, which supports the negationInd attribute, was created and serves as a wrapper (referred to as "Act Wrapper").

- Submitters are advised to actively ensure that data for the affected QDM data types are reported within the correct corresponding Act Wrapper template so that the data will be processed correctly.

Encounter Performed Example

Without Act Wrapper

With Act Wrapper

```xml
<encounter classCode="ENC" moodCode="EVN">
    <!-- Conforms to C-CDA R2.1 Encounter Activity (V3) -->
    <templateId root="2.16.840.1.113883.10.20.22.4.49"
            extension="2015-08-01"/>
    <!-- Encounter Performed (V3) templateId-->
    <templateId root="2.16.840.1.113883.10.20.24.3.23"
        extension="2016-02-01"/>
    <!-- the encounter/id/@root -->
    <id root="12345678-9d11-439e-92b3-5d9815ff4de1"/>
    ...
</encounter>
```

```xml
<act classCode="ACT" moodCode="EVN">
    <!--Encounter performed Act -->
    <templateId root="2.16.840.1.113883.10.20.24.3.133"/>
    <id root="ec8a6ff8-ed4b-4f7e-82c3-e98e58b45de7"/>
    <code code="ENC" codeSystem="2.16.840.1.113883.5.6"
        displayName="Encounter" codeSystemName="ActClass"/>
    <entryRelationship typeCode="SUBJ">
        <encounter classCode="ENC" moodCode="EVN">
            <!-- Conforms to C-CDA R2.1 Encounter Activity (V3) -->
            <templateId root="2.16.840.1.113883.10.20.22.4.49"
                extension="2015-08-01"/>
            <!-- Encounter Performed (V3) templateId-->
            <templateId root="2.16.840.1.113883.10.20.24.3.23"
                extension="2016-02-01"/>
            <!-- the encounter/id/@root -->
            <id root="12345678-9d11-439e-92b3-5d9815ff4de1"/>
            ...
        </encounter>
    </entryRelationship>
</act>
```

Without the Act Wrapper, this
will still pass schematron validation
but the Encounter will not be included
in the measure calculation.

Resources

- Detailed guidance and examples for proper submission of QRDA Category I templates are found on the [Electronic Clinical Quality Improvement (eCQI) Resource Center QRDA Space](#).

- Current and past implementation guides - [CMS eCQM Library](#) and the [eCQI Resource Center QRDA Space](#).

- For questions related to this guidance, the QRDA Implementation Guides or Schematrons, visit the [ONC QRDA JIRA Issue Tracker](#).

Hospice QRP Provider Preview Reports Now Available

- CMS encourages Hospice providers to preview their Q4-2015 to Q3-2016 quality measure results via the Hospice Provider Preview Reports for the Hospice Item Set (HIS) prior to the release of Hospice Compare in Summer 2017.

- Hospice providers can access their reports via the Certification and Survey Provider Enhanced Reports (CASPER) application available on Hospices' "Welcome to the CMS QIES Systems for Providers" page.

- **Providers have 30 days to preview their quality measure results (June 1, 2017 through June 30, 2017).**

- To access your reports visit the Preview Report Access Instructions and Hospice Quality Public Reporting webpage to learn more.

IRF and LTCH Provider Preview Reports Are Now Available

- CMS encourages providers to review their performance data on each quality measure based on Q4-2015 to Q3-2016 data prior to the September 2017 IRF and LTCH Compare refresh.

- **Providers have until the end of the 30-day preview period (June 30, 2017) to review their data.**

- To access your reports visit the Preview Report Access Instructions and IRF Quality Public Reporting and LTCH Quality Public Reporting webpages to learn more.

IRF and LTCH Compare Quarterly Refresh is Now Available

- The June 2017 quarterly IRF and LTCH Compare refresh, including quality measure results based on data submitted to CMS between Q3-2015 and Q2-2016 is now available.

- Visit [IRF Compare](#) and [LTCH Compare](#) to view the data.

Questions?

cmsqualityteam@ketchum.com

Thank you!

The next CMS Quality Partner Workgroup is scheduled tentatively for **Monday, July 17 from 12 – 1 p.m. ET**. CMS will share more information when it becomes available.